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FORM D	UNITED STATES MAD SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	2 9 200 OMB APPROVAL OMB Number: 3235-0076 Expires:
Gar.	FORM D	Estimated average burden
· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NOTICE OF SALE OF SECURITIE PURSUANT TO REGULATION D SECTION 4(6), AND/OR IFORM LIMITED OFFERING EXEM	SEC USE ONLY Prefix Serial  DATE RECEIVED
Name of Offering (	mendment and name has changed, and indicate change.) s C Shares	
<del></del>	Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
· <del>· · · · · · · · · · · · · · · · · · </del>	A. BASIC IDENTIFICATION DATA	, same rankara ann ann ann ann ann ann ann ann ann
1. Enter the information requested about the		07049529
Name of Issuer ( check if this is an ame Emergent Music LLC	ndment and name has changed, and indicate change.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
565 Congress Street, Portland, ME 04		207.774.3100
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Internet music discovery		PROCESSEL
Type of Business Organization  corporation business trust	limited partnership, to be formed limited liab	please specify): bility comany
Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization	Organization: 12 04 Actual Esti  (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated e: ME
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering 77d(6).	g of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC) on the earli	er than 15 days after the first sale of securities in the offering ier of the date it is received by the SEC at the address given b United States registered or certified mail to that address.	•
Where To File: U.S. Securities and Exchange	e Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this noti photocopies of the manually signed copy or b	ce must be filed with the SEC, one of which must be manual pear typed or printed signatures.	ly signed. Any copies not manually signed must be
	ntain all information requested. Amendments need only repond any material changes from the information previously supp	
Filing Fee: There is no federal filing fee.		
ULOE and that have adopted this form. Iss are to be, or have been made. If a state requ	on the Uniform Limited Offering Exemption (ULOE) for suers relying on ULOE must file a separate notice with the unires the payment of a fee as a precondition to the claim for filed in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

this notice and must be completed.

filing of a federal notice.

## A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter ☐ Director General and/or Check Box(cs) that Apply: Managing Partner Full Name (Last name first, if individual) Diane E. Sammer Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Gary B. Robinson Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Promoter General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Randy Labbe Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Madeline S. Mooney Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Robert W. Swerdlow Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Donald A. Gooding Business or Residence Address (Number and Street, City, State, Zip Code) 565 Congress Street, Portland, ME 04101 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING 19								24 P					
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								1	Yes	No <b>⊠</b>			
-,	Answer also in Appendix, Column 2, if filing under ULOE.										_		
2.									.,	\$_5,00	00.00		
3.									Yes	No 			
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any							rectly, any					
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									,				
Ful n/a		ast name i	irst, if indi	vidual)		·							
		Residence .	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)			<u></u>			<u> </u>
												·	
Nai	me of Ass	ociated Br	oker or Dea	ıler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers				<u> </u>		
	(Check '	'All States	" or check i	individual	States)	•••••		•••••••				All States	
	(AL	AK	$\Lambda Z$	ΔŘ	CA	CO	CT	DE	DC	FL	GA	HI	(ID)
	IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	Full Name (Last name first, if individual)												
D.,,	einaee or	Dacidonce	Address (N	Jumber an	d Street C	ity State 2	Zin Code)			<u></u>			
DΨ	Silicss of	Residence	Addiess (I	vannoer un	u 511cci, c	ny, blate, z	sip code)						·
Nai	me of Ass	ociated Br	oker or Dea	aler									
Sta			Listed Has								•••		
	(Check	'All States	" or check	individual	States)	•••••	•••••••	•••••				☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID .
	MT	NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{WV}$	WI	WY	PR
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								☐ All	States				
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	TL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0.00	s 0.00
	Equity	0.00	\$ 0.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify LLC Class B and Class C Shares		\$ 0.00
	Total		\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases § 0.00
			\$ 0.00
	Non-accredited Investors		'
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T 1044 1	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
•	Transfer Agent's Fees		s0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees	<b>[</b> ]	\$_5,000.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify)		\$ <u>0.00</u>
	Total	_	a 5,000,00

#C. OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS TO

C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."		SS	\$	
5. Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate ar the payments listed must equal the adjusted gro	nd		
		Payments to Officers, Directors, & Affiliates	Payments to Others	
Salaries and fees		🗔 \$ 72,000.00	<b>⊘</b> \$ 180,000.00	
Purchase of real estate		_	☐ \$ 0.00	
Purchase, rental or leasing and installation of mac	hinery	\$ 0.00	<b>Z</b> \$ 5,000.00	
Construction or leasing of plant buildings and fac			0.00	
Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ue of securities involved in this		□ \$ <u>0.00</u>	
Repayment of indebtedness			□ \$ <u>0.00</u>	
Working capital		\$_0.00	\$88,000.00	
Other (specify): Share Grant Pursuant to 2006	Equity Incentive Plan	\$ 0.00	\$ 75,000.00	
			<b>s</b>	
Column Totals		\$_72,000.00	\$_348,000.00	
Total Payments Listed (column totals added)	Total Payments Listed (column totals added)		20,000.00	
	D. FEDERAL SIGNATURE		The state of the s	
The issuer has duly caused this notice to be signed by the signature constitutes an undertaking by the issuer to fur the information furnished by the issuer to any non-accurate.	undersigned duly authorized person. If this notinish to the U.S. Securities and Exchange Comm	ce is filed under Ru hission, upon writte		
Issuer (Print or Type)	Signature -	Date /	/	
Emergent Music LLC	Den Jane	3/27	107	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Diane E. Sammer	Chief Executive Officer			

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)